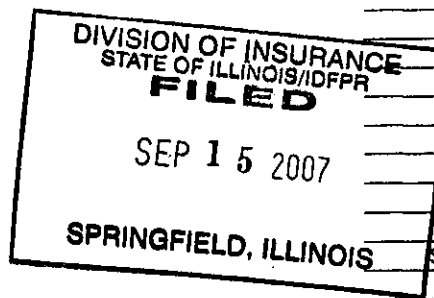


ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 09/15/2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation		
16. Other		
Line of Insurance	\$360,299	-7%



Does filing only apply to certain territory (territories) or certain classes? If so, specify _____

Applicable to all territories and classifications

Brief description of filing (if filing follows rates of an advisory organization, specify organization) This filing is a revision to the Loss Cost Multiplier for Carolina Casualty Insurance Company of 1.52 to 1.41. The revised loss cost multiplier will be used in conjunction with the NCC approved loss cost filing effective 1.1.2007. Ref NCCI filing approval circular IL-2006-11.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

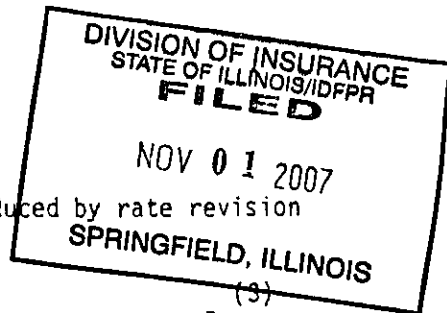
Carolina Casualty Insurance Company
Name of Company

Jim Gilbert – Senior Vice President
Official — Title

Section 754. EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate revision
effective 11-01-2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger		0.00%
Commercial		0.00%
2. Automobile Physical Damage		
Private Passenger		0.00%
Commercial		0.00%
3. Liability Other Than Auto		0.00%
4. Burglary and Theft		0.00%
5. Glass		0.00%
6. Fidelity		0.00%
7. Surety		0.00%
8. Boiler and Machinery		0.00%
9. Fire		0.00%
10. Extended Coverage		0.00%
11. Inland Marine		0.00%
12. Homeowners		0.00%
13. Commercial Multi-Peril		0.00%
14. Crop Hail		0.00%
15. Other Workers Compensation	5,441,752	2.87%
Life of Insurance		

Does filing only apply to certain territory (territories) or certain
classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): We consider our rates to be independent, based upon
both NCCI and our own experience.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of
new rates.

Hastings Mutual Insurance Co.
Name of Company

Judy E. VAN ARMAN
Official--Title

MAR 17 2008

SOS-ISO-CODE-UNIT

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/08

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Worker's Compensation</u> Line of Insurance	\$3,648,090	-10.4%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
We are filing a tiered rating plan.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

XL Specialty Insurance Company

Name of Company

Boyd Adams-AVP State Filings Manager

Official - Title

